

## Application for a Career and Technical License

## State of Iowa Board of Educational Examiners Licensure

Grimes State Office Building 400 E. 14<sup>th</sup> St. Des Moines, Iowa 50319-0147

Revised 10/07

## **INSTRUCTIONS:**

- 1. Complete the first four sections of this form, and have your administrator complete the last section.
- 2. A complete application must include the completed application, official transcripts (if any), fingerprint packet, and fees.
- 3. Fees include the \$85 application fee and the \$52 background check fee (a single check or money order for \$137 is acceptable).
- Send all materials and check or money order (made payable to Board of Educational Examiners) to: State of Iowa, Board of Educational Examiners/ Licensure, Grimes State Office Building, 400 E. 14<sup>th</sup> St., Des Moines, Iowa 50319-0147.
- 5. Please allow 6 to 8 weeks to process.

Name changes require a photocopy of official legal documentation.

Applicant's Folder #	Social Security #	Date of Birth Month Day Year	Male Female
Last Name	First Name	Middle Name	Maiden Name
Address	City	State	Zip Code
Home Phone ( )	Work Phone	Email Address	

A minimum of 6000 hours of recent, hands-on, professional experience in the specific area in which this license is sought is required for the issuance of this license. Please describe at least 6000 hours of work experience relevant to the teaching endorsement for which you are applying.

Name and Address of Employer	Dates of Employment	Hours/Week	Total Hours	Describe Position and Nature of Work
Employer:	From: / /			
Address:	To: / /			
Employer:	From: / /			
Address:	To: / /			
Employer:	From: / /			
Address:	To: / /			
Employer:	From: / /			
Address:	To: / /			
Employer:	From: / /			
Address:	To: / /			

Have you ever held an Iowa teaching license Yes	□ No □	
Please check the type of license for which you are apply Provisional Secondary Career and Technical Teachi SecondaryCareer and Technical Teaching License Se	ng License (Experience has been con	
It is required that ALL of the following course work be Teaching License. If you have already completed any on the New teacher Workshop (To be completed during or be Curriculum (course planning and construction)  Methods of teaching  Foundations of vocational education  Evaluation of students and program (Often called Education An Iowa approve Human Relations course	of this work, please check the course pefore the first year of teaching)	
Background Information:		
For any "Yes" response attach a written explanation on 8 this application form. *If you have reported a "Yes" response		
this application if no further conviction(s) has occurred.  a. Yes No PR Have you ever been	n convicted of a felony?	
b. Yes No PR Have you ever been	n convicted of a crime other than parki	ing or speeding violations
(report any OWIs)? c. Yes No PR Have you ever had a	a founded report of child abuse made	against you?
d. Yes No PR Have you ever had a	an educational license denied, revoke	ed, or suspended?
Statement of Fraud: Fraud in procurement of a license complaint with the lowa Board of Educational Examiners		poses will constitute grounds for filing a
I certify under penalty of perjury and pursuant to the laws	s of the state of lowa that the precedir	ng information is true and correct.
Signature of Applicant	Date	
TO BE COMPLETED BY ADMINISTRATOR IN T		
The school s	system requests that	(name of ambigant)
be issued a Provisional Career and Technical Teaching	License to serve as	(name of applicant)
(List	position and grade level.)	
I verify that the applicant will instruct only in that speci will instruct only those students who are enrolled in that	ific career and technical program in w	which he/she is endorsed and that the applicant
This request is for period beginning with the following	school year- 2 2	
(Administrator's Signature)	(Print or type administrator's name)	(date)
(Applicant's Signature)	(date)	